



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/695,917	10/30/2003	Chris Aldridge	1415.P007US/KJT/ayu

38556

LAWRENCE Y.D. HO & ASSOCIATES PTE LTD
30 BIDEFORD ROAD, #07-01, THONGSIA BUILDING
SINGAPORE, 229922
SINGAPORE

U S 9 MAR 2005

CONFIRMATION NO. 5640

FORMALITIES LETTER



OC000000015271089

Date Mailed: 02/25/2005

NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

Filing Date Granted

The U.S. Patent and Trademark Office has received your reply on 02/03/2005 to the Notice to File Missing Parts (Notice) mailed 11/19/2004 and it has been entered into the nonprovisional application. The reply, however, does not include the following items required in the Notice.

The period of reply remains as set forth in the Notice. You may, however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a) accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application. Replies should be mailed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of **\$250** as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due..

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$250** for a Large Entity

- Total additional claim fee(s) for this application is **\$250**

- \$200 for 1 independent claims over 3.
- \$50 for 11 total claims over 20.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450

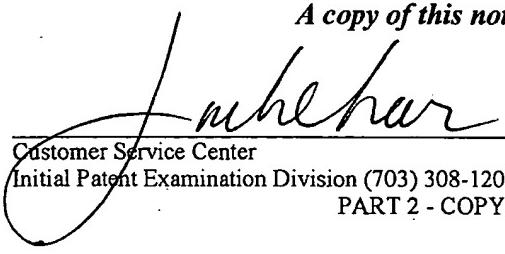
03/15/2005 MBYEYENE1 00000045 10695917

01 FC:1201
02 FC:1202200.00 OP
50.00 OP

Adjustment date: 03/15/2005
10/31/2003 EAREDAY1 00000052 10695917
03 FC:1999 -43.00 OP
MBYEYENE1

Alexandria VA 22313-1450

A copy of this notice MUST be returned with the reply.


Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



01/18/05
10695917

Attachment to Notice Regarding Fee Deficiency

Due to the limitations of our automated systems, the attached Notice requires an incorrect amount due by applicant. The amount shown on the Notice does not include an overpayment that could not be applied to the fees assessed in the application.

Total amount due as shown on Notice: \$ 250.00

Minus total unapplied amount: \$ 43.00

Total amount due from applicant: \$ 207.00

Any fees listed on the Notice, other than what is listed above, are correct and are due in the specified amounts.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: **Chris ALDRIDGE**

Serial No. 10/695,917

Filed: October 30, 2003

Group Art Unit: 2121

Confirmation No. 5640

Title: **METHOD AND APPARATUS FOR A CONTROL SIGNAL GENERATING CIRCUIT**

Attorney Docket No.: **1415.P007US/KJT/ayu**

RESPONSE TO NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

United States Patent and Trademark Office
Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
USA

Dear Sir/Madam:

In response to your Notice of Incomplete Reply (Nonprovisional) dated February 25, 2005 and your letter of explanation dated February 25, 2005, we hereby submit the following, for your necessary action:

1. Transmittal Form (PTO/SB/21)
2. Fee Transmittal (PTO/SB/17)
3. Credit Card Payment Form for \$207.00 (PTO-2038).
Please note that this amount is based on your Attachment to Notice Regarding Fee Deficiency dated January 18, 2005
4. Copy of Notice of Incomplete Reply and the Attachment to Notice Regarding Fee Deficiency.

We hope the above is now in order for the next stage.

Thank you.

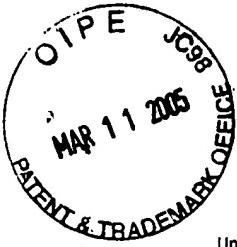
Yours sincerely,
Lawrence Y.D. Ho & Associates

George D. Liu
Registration No. 47,752

March 11, 2005

Date

Customer No.: 38556
Tel: (703) 536-1713
Fax: (703) 415-8601



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

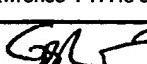
(to be used for all correspondence after initial filing)

Application Number	10/695,917
Filing Date	October 30, 2003
First Named Inventor	Chris ALDRIDGE
Art Unit	2121
Examiner Name	
Total Number of Pages in This Submission	1
	Attorney Docket Number
	1415.P007US/KJT/ayu

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Credit Card Payment Form for \$207.00
Remarks THIS IS IN RESPONSE TO YOUR NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL) DATED FEBRUARY 25, 2005.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Lawrence Y H Ho & Associates		
Signature			
Printed name	George D. Liu		
Date	March 11, 2005	Reg. No.	47,752

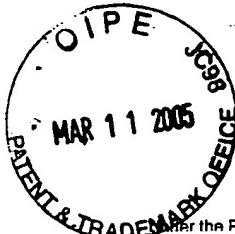
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		
Typed or printed name		Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known	
Application Number	10/695,917
Filing Date	October 30, 2003
First Named Inventor	Chris ALDRIDGE
Examiner Name	
Art Unit	2121
Attorney Docket No.	1415.P007US/KJT/ayu

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues) Fee (\$)
50 Fee (\$)
25

Each independent claim over 3 (including Reissues) Fee (\$)
200 Fee (\$)
100

Multiple dependent claims Fee (\$)
360 Fee (\$)
180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
- 20 or HP =	x 0	= 0	= 0			

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	0 x 0	= 0	= 0			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	0 (round up to a whole number) x	= 0	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Additional Fees in response to Notice Regarding Fee Deficiency

Fees Paid (\$)

0

207

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 47,752	Telephone (703) 536-1713
Name (Print/Type)	George D. Liu		Date March 11, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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